Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint (Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Kraig First name Leroy Middle name	First name Middle name	
	Bring your picture identification to your meeting with the trustee.	Reed Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8892		

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	1847 Knowles Street	If Debtor 2 lives at a different address:
		Cleveland, OH 44112-1000 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		County County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Del	otor 1 Kraig Leroy Reed					Case r	number (if known)			
Pai	t 2: Tell the Court About	our Bankru	ptcy Ca	se						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	■ Chapter 7								
		☐ Chapter	11							
		☐ Chapter	12							
		☐ Chapter	13							
8.	How you will pay the fee	about order	how yo	entire fee when I file my pe u may pay. Typically, if you a attorney is submitting your pa address.	re paying	the fee yourself,	you may pay with cash	, cashier's check, or money		
				the fee in installments. If y		e this option, sign	and attach the Applica	ation for Individuals to Pay		
			•	e <i>in Installment</i> s (Official Ford t my fee be waived (You ma	,	this option only i	f you are filing for Chap	oter 7. By law, a judge may,		
		but is	not requ	uired to, waive your fee, and or family size and you are una	may do so	only if your inco	me is less than 150% o	of the official poverty line that		
				n to Have the Chapter 7 Filir						
9.	Have you filed for bankruptcy within the	□ No.								
	last 8 years?	Yes.								
		I	District	Southern District of Ohio/Cincinnati	When	4/02/19	Case number	19-11181		
		1	District		When		Case number			
		1	District		_ When		Case number			
10.	Are any bankruptcy cases pending or being	■ No								
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.								
		I	Debtor				Relationship to y	ou		
		1	District		_ When		Case number, if			
			Debtor				Relationship to y			
			District		_ When		Case number, if	known		
11	Do you rent your	Пис	Go to li	ne 12						
• • •	residence?	□ No.		ur landlord obtained an evicti	ion iudame	ent against vou?				
		Yes.	•	No. Go to line 12.	.ori jaagiili	agamot you:				
			_		t About -	Eviction Indone	ant Against Vo.: /Farm	101A) and file it with this		
				Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	ı Aboul ar	г <u>-</u> гисион зиадтв	an Agamsi 100 (FORM	TOTA) and me it with this		

)eb	tor 1 Kraig Leroy Reed		Case number (if known)			
ar	Report About Any Bu	ısinesses	ou Own as a Sole Proprietor			
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.			
		☐ Yes.	Name and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code			
	it to this petition.		Check the appropriate box to describe your business:			
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))			
			☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))			
			■ None of the above			
3.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation in 11 U.S	e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate s. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of as, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure s.C. 1116(1)(B).			
	For a definition of small business debtor, see 11	■ No.	I am not filing under Chapter 11. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Ban	nkruptcy		
	U.S.C. § 101(51D).		Code.	. ,		
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankrupto	cy Code.		
ar	4: Report if You Own or	Have An	Hazardous Property or Any Property That Needs Immediate Attention			
4.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed,		Where is the property?			
	or a building that needs urgent repairs?					
	0		Number, Street, City, State & Zip Code			
_						

Debtor 1 Kraig Leroy Reed

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Kraig Leroy Reed			Case number (if k	nown)
Par	6: Answer These Questi	ons for Rep	porting Purposes		
16.	What kind of debts do you have?		Are your debts primarily consun ndividual primarily for a personal,	ner debts? Consumer debts are defined i family, or household purpose."	n 11 U.S.C. § 101(8) as "incurred by an
		I	☐ No. Go to line 16b.		
		I	Yes. Go to line 17.		
				ss debts? Business debts are debts that are through the operation of the business	•
		Ī	☐ No. Go to line 16c.		
		I	☐ Yes. Go to line 17.		
		16c. S	State the type of debts you owe the	at are not consumer debts or business de	bts
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7. Go	to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses	— 163.		u estimate that after any exempt property e to distribute to unsecured creditors?	is excluded and administrative expenses
	are paid that funds will be available for distribution to unsecured creditors?		■ No □ Yes		
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets to be worth?	□ \$100,00	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$100,00	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
Par	7: Sign Below				
For	you	I have exa	mined this petition, and I declare u	under penalty of perjury that the informatio	n provided is true and correct.
				aware that I may proceed, if eligible, undvailable under each chapter, and I choose	
				y or agree to pay someone who is not an ce required by 11 U.S.C. § 342(b).	attorney to help me fill out this
		I request re	elief in accordance with the chapte	er of title 11, United States Code, specified	d in this petition.
		bankruptcy and 3571.	case can result in fines up to \$25	ealing property, or obtaining money or pro 0,000, or imprisonment for up to 20 years	
		Kraig Ler Signature		Signature of Debtor 2	
		Executed of	On August 14, 2019 MM / DD / YYYY	Executed on MM / DD	D/YYYY

Debtor 1	Kraig Leroy Reed	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Lee R. Kravitz	Date	August 14, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Lee R. Kravitz 0025634		
Printed name		
Law Offices of Lee R. Kravitz		
Firm name		
4508 State Road		
Cleveland, OH 44109		
Number, Street, City, State & ZIP Code		
Contact phone 216-749-0808	Email address	leekravitz@sbcglobal.net
0025634 OH		
Bar number & State		

Fill i	n this inform	nation to identify your	case:			
Debt		Kraig Leroy Reed				
		First Name	Middle Name	Last Name		
Debt (Spous	or 2 se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	nkruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO		
Case	number					
(if kno	wn)				_	eck if this is an ended filing
					am	crided filling
∩ff	icial Fo	rm 106Sum				
			and Liabilities a	nd Certain Statistical Information	า	12/15
inforr	mation. Fill o	out all of your schedule	es first; then complete t	e are filing together, both are equally responsible the information on this form. If you are filing ame to the top of this page.		
						r assets e of what you own
1.	Schedule A	/B: Property (Official Fo	orm 106A/B)			
	1a. Copy line	e 55, Total real estate, fr	om Schedule A/B		. \$_	0.00
	1b. Copy line	e 62, Total personal prop	perty, from Schedule A/B		\$_	20,219.00
	1c. Copy line	e 63, Total of all property	on Schedule A/B		. \$_	20,219.00
Part	2: Summa	arize Your Liabilities				
						r liabilities unt you owe
			aims Secured by Propert nn A, Amount of claim, a	y (Official Form 106D) t the bottom of the last page of Part 1 of <i>Schedule D</i>	\$_	24,363.96
			Unsecured Claims (Offici I (priority unsecured clain	al Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>	\$_	714.13
	3b. Copy the	e total claims from Part 2	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$_	38,360.63
				Your total liabiliti	es \$	63,438.72
Part	3: Summa	arize Your Income and	Expenses			
		Your Income (Official Foombined monthly income		e I	. \$_	5,020.00
		Your Expenses (Official nonthly expenses from lin			\$_	5,301.00
Part	4: Answe	r These Questions for	Administrative and Sta	tistical Records		
	-		er Chapters 7, 11, or 13° on this part of the form.	? Check this box and submit this form to the court with	your other	schedules.
	Yes					
7.	What kind o	of debt do you have?				
				debts are those "incurred by an individual primarily 9g for statistical purposes. 28 U.S.C. § 159.	for a persor	nal, family, or

the court with your other schedules.

page 1 of 2

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Official Form 106Sum

Best Case Bankruptcy

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,300.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	714.13
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	714.13

Debtor 1			d this filing.				
Debtor 1	mation to identify		ia this filing:				
Dobtor 1	Kraig Leroy F		Middle Name	Last Name			
Debtor 2							
(Spouse, if filing)	First Name	ı	Middle Name	Last Name			
United States Ba	ankruptcy Court for t	the: NORTI	HERN DISTRICT C	OF OHIO			
Case number							Check if this is an
							amended filing
Official Fo	orm 106A/B						
			_				
Schedu	le A/B: Pr	operty	<i>!</i>				12/15
think it fits best. If information. If more Answer every que	Be as complete and a re space is needed, a stion.	ccurate as po ttach a separa	ssible. If two married ate sheet to this form	nce. If an asset fits in more than d people are filing together, both n. On the top of any additional pa	are equally responsible for	supply	ring correct
Part 1: Describe	Each Residence, Bu	ilding, Land, o	or Other Real Estate	You Own or Have an Interest In			
1. Do you own or	have any legal or equ	uitable interes	in any residence, b	ouilding, land, or similar property	?		
No. Go to Pa	ırt 2.						
☐ Yes. Where	is the property?						
Part 2: Describe	Your Vehicles						
3. Cars, vans, to □ No ■ Yes	rucks, tractors, spo	ort utility veh	icles, motorcycle	:S			
3.1 Make:	Jeep		Who has an intere	est in the property? Check one	Do not deduct secure		
-	Renegade		■ Debtor 1 only		the amount of any sec Creditors Who Have (
Year:	2017		Debtor 2 only		Current value of the	Cı	urrent value of the
Approxima	ite mileage:	38,000	Debtor 1 and De	ebtor 2 only	entire property?		ortion you own?
Other infor	mation:		☐ At least one of t	the debtors and another			
			Check if this is (see instructions)	s community property	\$14,000.00	<u> </u>	\$14,000.00
				nal vehicles, other vehicles, ar sels, snowmobiles, motorcycle			

Official Form 106A/B Schedule A/B: Property

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Best Case Bankruptcy

page 1

De	ebtor 1	Kraig Leroy	Reed	Case r	number (if known)	
	Examp ☐ No —	nold goods and folles: Major appliar	furnishings nces, furniture, linens, china, kitchenware			
	■ Yes.	Describe				
			furniture, appliances			\$2,000.00
	□ No	les: Televisions a	ind radios; audio, video, stereo, and digital e I phones, cameras, media players, games	equipment; computers, printers, s	canners; music collections;	
			TV (2), computer, cell phone			\$1,800.00
	Examp		figurines; paintings, prints, or other artwork ons, memorabilia, collectibles	; books, pictures, or other art obje	ects; stamp, coin, or baseba	all card collections;
	Examp	nent for sports a les: Sports, photo musical instr	ographic, exercise, and other hobby equipme	ent; bicycles, pool tables, golf clu	bs, skis; canoes and kayak	s; carpentry tools;
	■ No		s, shotguns, ammunition, and related equipr	ment		
	□ No		othes, furs, leather coats, designer wear, sh	oes, accessories		
			clothing			\$300.00
	□ No		welry, costume jewelry, engagement rings, v	wedding rings, heirloom jewelry, '	watches, gems, gold, silver	
			watches (2), ring			\$500.00
	Exam ☐ No	arm animals ples: Dogs, cats, Describe	birds, horses			
			don			¢50.00
			dog			\$50.00
	■ No	ther personal an	d household items you did not already li	st, including any health aids yo	ou did not list	

Official Form 106A/B

Schedule A/B: Property

page 2

Best Case Bankruptcy

Debtor 1 Kraig Leroy Reed		Case number (if known)	Case number (if known)			
			art 3, including any entries for pages you have attached	\$4,650.00		
Part 4:	Describe Your Financia	l Assets				
		al or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.		
□ No	<i>mples:</i> Money you hav	ve in your wallet, in your ho	ome, in a safe deposit box, and on hand when you file your petition	on		
— 16	5		Cash	\$25.00		
	institutions. If y	•	punts; certificates of deposit; shares in credit unions, brokerage has with the same institution, list each.	nouses, and other similar		
■ Ye	S		Institution name:			
		17.1. Checking	Navy Federal Credit Union	\$300.00		
		17.2. Savings	Navy Federal Credit Union	\$10.00		
Exa ■ No	mples: Bond funds, in	publicly traded stocks vestment accounts with bro	okerage firms, money market accounts name:			
	publicly traded stoc t venture	k and interests in incorpo	orated and unincorporated businesses, including an interes	t in an LLC, partnership, and		
■ No		nation about them Name of entity:	 % of ownership:			
Neg	otiable instruments ind -negotiable instrumen	clude personal checks, cas	otiable and non-negotiable instruments Shiers' checks, promissory notes, and money orders. Shiers' to someone by signing or delivering them.			
	s. Give specific inform	ation about them Issuer name:				
	rement or pension ac mples: Interests in IRA		103(b), thrift savings accounts, or other pension or profit-sharing	plans		
■ No	s. List each account s	eparately. Type of account:	Institution name:			
You <i>Exa</i>	mples: Agreements wi	leposits you have made so	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications compar	ies, or others		
■ No	S		Institution name or individual:			
_	,	periodic payment of mone	ey to you, either for life or for a number of years)			
■ No □ Ye		er name and description.				

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Official Form 106A/B

page 3

Schedule A/B: Property

De	entor 1 Kraig Le	eroy Reed	Case number (if k	nown)
	Internate to an exte	IDA in an annual in a superior de ADI E		
		ucation IRA, in an account in a qualified ABLE progra)(1), 529A(b), and 529(b)(1).	am, or under a qualified state tuition	on program.
	☐ Yes	Institution name and description. Separately file the r	ecords of any interests.11 U.S.C. § 5	521(c):
25.	Trusts, equitable o	or future interests in property (other than anything li	sted in line 1), and rights or powe	rs exercisable for your benefit
	☐ Yes. Give specif	fic information about them		
		its, trademarks, trade secrets, and other intellectual it domain names, websites, proceeds from royalties and		
		fic information about them		
27.	Examples: Building	ses, and other general intangibles g permits, exclusive licenses, cooperative association h	oldings, liquor licenses, professional	licenses
	■ No□ Yes. Give specif	fic information about them		
Мо	oney or property ov	wed to you?		Current value of the
				portion you own?Do not deduct secured claims or exemptions.
	Tax refunds owed ■ No	d to you		
	☐ Yes. Give specifi	ic information about them, including whether you already	filed the returns and the tax years	
29.	Family support Examples: Past du ■ No	ue or lump sum alimony, spousal support, child support,	maintenance, divorce settlement, pr	operty settlement
	☐ Yes. Give specifi	ic information		
30.	benefit	omeone owes you I wages, disability insurance payments, disability benefit ts; unpaid loans you made to someone else	s, sick pay, vacation pay, workers' c	ompensation, Social Security
	■ No□ Yes. Give specif	fic information		
	_ '	ance policies , disability, or life insurance; health savings account (HS	A); credit, homeowner's, or renter's i	nsurance
	☐ No Yes Name the in	nsurance company of each policy and list its value.		
	— res. Name the fi	Company name:	Beneficiary:	Surrender or refund value:
		GLI Whole Life	children	\$1,234.00
32.		operty that is due you from someone who has died eficiary of a living trust, expect proceeds from a life insurd.	ance policy, or are currently entitled	to receive property because
	■ No			
	☐ Yes. Give specif	tic information		
33.	Examples: Accide	ird parties, whether or not you have filed a lawsuit onts, employment disputes, insurance claims, or rights to		
	■ No □ Yes. Describe ea	ach claim		

Official Form 106A/B Schedule A/B: Property page 4

Deb	otor 1	Kraig Leroy Reed		Case number (if known)	
34.	Other of	contingent and unliquidated claims of every nature, inclu	ding counterclaims	of the debtor and rights to set off	claims
	No				
	☐ Yes.	Describe each claim			
35.	Any fir	ancial assets you did not already list			
	■ No	,			
	☐ Yes.	Give specific information			
36.		he dollar value of all of your entries from Part 4, includin art 4. Write that number here			\$1,569.00
Part	5: De	scribe Any Business-Related Property You Own or Have an Inter-	est In. List any real esta	ate in Part 1.	
37. I	Do you o	own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go	to Part 6.			
	Yes. C	Go to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You	Own or Have an Interes	st In.	
	If y	ou own or have an interest in farmland, list it in Part 1.			
46.	Do yoι	own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	■ No.	Go to Part 7.			
	☐ Yes	. Go to line 47.			
Part	t 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	D	have all an arrange of a surficient and the description of the state o			
53.		I have other property of any kind you did not already list? bles: Season tickets, country club membership	•		
	■ No	,			
	☐ Yes.	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write the	at number here		\$0.00
Part	t 8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$0.00
56.	Part 2	2: Total vehicles, line 5	\$14,000.00		
57.	Part 3	3: Total personal and household items, line 15	\$4,650.00		
58.		l: Total financial assets, line 36	\$1,569.00		
59.		5: Total business-related property, line 45	\$0.00		
60.		6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$20,219.00	Copy personal property total	\$20,219.00
62	Total	of all property on Schodule A/D. Add line EE . line CO.			#00.040.00
63.	ıotal	of all property on Schedule A/B. Add line 55 + line 62			\$20,219.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in this informa	ation to identify your	case:		
Debtor 1	Kraig Leroy Reed			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO	
Case number				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming	Check one only,	even if your	spouse is filing	g with you.
----	--	-----------------	--------------	------------------	-------------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
2017 Jeep Renegade 38,000 miles Line from Schedule A/B: 3.1	\$14,000.00		\$4,000.00	Ohio Rev. Code Ann. § 2329.66(A)(2)	
Elle II din Gonedale / V.B. G.1			100% of fair market value, up to any applicable statutory limit	2525.65(: 1)(2)	
furniture, appliances Line from Schedule A/B: 6.1	\$2,000.00		\$2,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Elife Holli Genedale 74 B. G.1	J		100% of fair market value, up to any applicable statutory limit		
TV (2), computer, cell phone Line from Schedule A/B: 7.1	\$1,800.00		\$1,800.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line Holli Gareagle 742. TT			100% of fair market value, up to any applicable statutory limit	2020:00(^)(*)(0)	
clothing Line from Schedule A/B: 11.1	\$300.00		\$300.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line Holli Schedule A.B. 1111			100% of fair market value, up to any applicable statutory limit	2020:00(^)(*)(0)	
watches (2), ring Line from Schedule A/B: 12.1	\$500.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	
LINE HOTH SCHEUUIE AVD. 12.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(4)(D)	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

De	tor 1 Kraig Leroy Reed			Case number (if known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Cash Line from Schedule A/B: 16.1	\$25.00		\$25.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
	Line nom concease 702. 1011		100% of fair market value, up any applicable statutory limit			
	Checking: Navy Federal Credit Union Line from Schedule A/B: 17.1	\$300.00		\$300.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
	Elle Holli Genedale A.D. 17.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(0)	
	Savings: Navy Federal Credit Union Line from Schedule A/B: 17.2	\$10.00		\$10.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
	Line Irom Schedule A.B. 11.2			100% of fair market value, up to any applicable statutory limit	2020.00(A)(0)	
	GLI Whole Life Beneficiary: children	\$1,234.00		\$1,234.00	Ohio Rev. Code Ann. §§ 2329.66(A)(6)(c), 3917.05	
	Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	2329.00(A)(0)(C), 3917.03	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3			led on or after the date of adjustmer	nt.)	
	No					
	☐ Yes. Did you acquire the property covered	ed by the exemption wi	ithin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

Fill	in this informa	ntion to identify you	r case:				
Deb	otor 1	Kraig Leroy Ree	ed				
		First Name	Middle Name	Last Name			
Deb	otor 2						
(Spo	use if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Bank	ruptcy Court for the:	NORTHERN DISTRICT OF OHI	0			
	e number						
(if kn	own)						eck if this is an
						am	ended filing
Off	icial Form	106D					
			Who Have Claims S	Secured	l by Propert	v	12/15
	ilicadic E	or curtors	Who have claims c	occui cu	i by i ropert	<u> </u>	12/10
is ne			f two married people are filing together out, number the entries, and attach it to				
	,	ave claims secured by	vour proporty?				
		-		ala a dada a Ma	b		
	□ No. Check tr	nis box and submit tr	nis form to the court with your other s	cnedules. Yo	u nave notning eise t	o report on this forr	n.
	Yes. Fill in a	III of the information b	pelow.				
Par	t 1: List All S	Secured Claims					
2. Li	st all secured cla	aims. If a creditor has n	nore than one secured claim, list the credi	tor senarately	Column A	Column B	Column C
for e	ach claim. If mor	e than one creditor has	a particular claim, list the other creditors i cal order according to the creditor's name.	in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	
2.1	Chrysler Ca	apital	Describe the property that secures th	e claim:	\$22,029.00	\$14,000.0	· .
	Creditor's Name		2017 Jeep Renegade 38,000 r		,		
	Attn: Bankr	uptcy Dept.					
	P.O. Box 96		A collection of the state of th				
	Fort Worth,	TX	As of the date you file, the claim is: Clapply.	heck all that			
	76161-1278		Contingent				
	Number, Street, C	ity, State & Zip Code	☐ Unliquidated				
			☐ Disputed				
Who	o owes the debt	? Check one.	Nature of lien. Check all that apply.				
	Debtor 1 only		An agreement you made (such as me	ortgage or secu	ured		
	Debtor 2 only		car loan)				
_	Debtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
_		debtors and another	☐ Judgment lien from a lawsuit	,			
	Check if this clair	m relates to a	Other (including a right to offset)				

1519

Last 4 digits of account number

Official Form 106D

community debt

Date debt was incurred 2017

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Deb	tor 1 Kraig Leroy Reed	Cas	se number (if known)		
	First Name Middle N	lame Last Name			
2.2	Merchants Preferred Lease-	Describe the property that secures the claim:	\$900.00	\$400.00	\$500.00
	Creditor's Name	Sectional couch			
	Purchae Serv a division of C/C				
	Financial Corp. 5500 Interestate North, ste 350 Atlanta, GA 30328	As of the date you file, the claim is: Check all that apply. Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated			
Who	o owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
	Debtor 1 only	■ An agreement you made (such as mortgage or secure	ed		
	Pebtor 2 only	car loan)			
_	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
■ A	at least one of the debtors and another	☐ Judgment lien from a lawsuit			
	Check if this claim relates to a community debt	Other (including a right to offset)			
Date	debt was incurred 2016	Last 4 digits of account number 7001			
2.3		Describe the property that secures the claim:	\$1,434.96	\$700.00	\$734.96
	Creditor's Name	jewlery			
	256 Data Drive Draper, UT 84020	As of the date you file, the claim is: Check all that apply. Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated			
Who	o owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
	Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secure car loan)	ed		
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
ПА	at least one of the debtors and another	☐ Judgment lien from a lawsuit			
	Check if this claim relates to a community debt	Other (including a right to offset)			
Date	debt was incurred 2017	Last 4 digits of account number 4664			
	-	Column A on this page. Write that number here:	\$24,363.96		
	his is the last page of your form, add ite that number here:	the dollar value totals from all pages.	\$24,363.96		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Fil	I in this inform	nation to identify your	case:					
De	btor 1	Kraig Leroy Reed						
_		First Name	Middle Name	Last Name	Э			
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name	9			
Un	ited States Bar	nkruptcy Court for the:	NORTHERN D	ISTRICT OF OHIO				
	se number						_	if this is an
 ∩f	ficial Form	106F/F					amend	led filing
			ho Have U	nsecured Claim	s			12/15
Sch Sch left.	edule G: Execut edule D: Credito	tory Contracts and Unexp ors Who Have Claims Sec tinuation Page to this pag	ired Leases (Offici ured by Property.	n a claim. Also list executo al Form 106G). Do not inclu f more space is needed, co nformation to report in a Pa	ide any cree py the Part	ditors with partially s you need, fill it out,	secured claims that a number the entries i	are listed in n the boxes on the
Pa	rt 1: List Al	l of Your PRIORITY Un	secured Claims					
1.	Do any credito	rs have priority unsecure	d claims against y	ou?				
	☐ No. Go to Pa	art 2.						
	Yes.							
2.	identify what typ possible, list the	be of claim it is. If a claim ha	as both priority and reaccording to the c	nore than one priority unsecu nonpriority amounts, list that or creditor's name. If you have me other creditors in Part 3.	claim here ar	nd show both priority a	and nonpriority amoun	ts. As much as
	(For an explana	ation of each type of claim, s	see the instructions	for this form in the instruction	booklet.)			
						Total claim	Priority amount	Nonpriority amount
2.1	State of	Ohio	Last 4	4 digits of account number	5921	\$470.79	\$470.79	\$0.00
	•	editor's Name nent of Taxation	Wher	was the debt incurred?	2011			
	30 E. Broad St 21st Fl. Columbus, OH 43215						=	
		reet City State Zip Code	As of	the date you file, the claim	is: Check a	II that apply		
	Who incurred	I the debt? Check one.	□ Co	ontingent				
	Debtor 1 o	nly	□ Ur	nliquidated				
	Debtor 2 o	nly	□ Di	sputed				
	Debtor 1 a	nd Debtor 2 only	Туре	of PRIORITY unsecured cla	ıim:			
	☐ At least on	e of the debtors and anothe	er 🗖 Do	omestic support obligations				
	☐ Check if the	his claim is for a commur	nity debt	exes and certain other debts y	ou owe the	government		
		subject to offset?	•	aims for death or personal in		-		
	■ No		□ Ot	her. Specify				
	☐ Yes			State Taxe	s			•

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 11

J		.=	****	40.40.04	
State of Ohio Priority Creditor's Name	Last 4 digits of account number	2784	\$243.34	\$243.34	\$0.0
Department of Taxation 30 E. Broad St 21st Fl. Columbus, OH 43215	When was the debt incurred?	2013			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all t	hat apply		
Who incurred the debt? Check one.	☐ Contingent				
■ Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
☐ At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the go	vernment		
Is the claim subject to offset?	\square Claims for death or personal inj	ury while you v	were intoxicated		
No	Other. Specify				
Yes	State Taxe	S			
 No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the 	this form to the court with your other see alphabetical order of the creditor	who holds ead			
No. You have nothing to report in this part. Submit■ Yes.	this form to the court with your other sealphabetical order of the creditor selaim. For each claim listed, identify when the creditor of the creditor selaim.	who holds ead	m it is. Do not list claims	already included in Par	t 1. If more n Page of
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.	this form to the court with your other see alphabetical order of the creditor claim. For each claim listed, identify what reditors in Part 3.If you have more to	who holds ead nat type of clair han three nong	m it is. Do not list claims	already included in Par fill out the Continuation	t 1. If more n Page of
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.	this form to the court with your other sealphabetical order of the creditor claim. For each claim listed, identify when the creditor of the cr	who holds each type of clair han three nonper	m it is. Do not list claims priority unsecured claims ed 10/17 Last Activ	already included in Par fill out the Continuation Total clain	t 1. If more n Page of
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the othe Part 2. AAFES Nonpriority Creditor's Name Attn: Bankruptcy Po Box 650060 Dallas, TX 75265 Number Street City State Zip Code	this form to the court with your other set alphabetical order of the creditor staim. For each claim listed, identify what reditors in Part 3.If you have more to the creditors in Part 3.If you have more than 2.If you have more than 2.	who holds each type of clair than three nonputer 7723 Opene 8/31/18	m it is. Do not list claims priority unsecured claims ed 10/17 Last Actives	already included in Par fill out the Continuation Total clain	t 1. If more n Page of
■ No. You have nothing to report in this part. Submit ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the othe Part 2. AAFES Nonpriority Creditor's Name Attn: Bankruptcy Po Box 650060 Dallas, TX 75265 Number Street City State Zip Code Who incurred the debt? Check one.	this form to the court with your other see alphabetical order of the creditor scalaim. For each claim listed, identify what creditors in Part 3.If you have more to the Last 4 digits of account number when was the debt incurred? As of the date you file, the claim the court of t	who holds each type of clair than three nonputer 7723 Opene 8/31/18	m it is. Do not list claims priority unsecured claims ed 10/17 Last Actives	already included in Par fill out the Continuation Total clain	t 1. If more n Page of
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the othe Part 2. AAFES Nonpriority Creditor's Name Attn: Bankruptcy Po Box 650060 Dallas, TX 75265 Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only	this form to the court with your other set alphabetical order of the creditor staim. For each claim listed, identify what reditors in Part 3.If you have more to the Last 4 digits of account number When was the debt incurred?	who holds each type of clair than three nonputer 7723 Opene 8/31/18	m it is. Do not list claims priority unsecured claims ed 10/17 Last Actives	already included in Par fill out the Continuation Total clain	t 1. If more n Page of
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. AAFES Nonpriority Creditor's Name Attn: Bankruptcy Po Box 650060 Dallas, TX 75265 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only	e alphabetical order of the creditor claim. For each claim listed, identify what reditors in Part 3.If you have more to be also be als	who holds each type of clair than three nonputer 7723 Opene 8/31/18	m it is. Do not list claims priority unsecured claims ed 10/17 Last Actives	already included in Par fill out the Continuation Total clain	t 1. If more n Page of
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. AAFES Nonpriority Creditor's Name Attn: Bankruptcy Po Box 650060 Dallas, TX 75265 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	e alphabetical order of the creditor claim. For each claim listed, identify what reditors in Part 3.If you have more to the Last 4 digits of account number. When was the debt incurred? As of the date you file, the claim of the contingent of the continue of the continue of the continue of the continue of the continu	who holds ead hat type of clair han three nongular records a second record	m it is. Do not list claims priority unsecured claims ed 10/17 Last Actives	already included in Par fill out the Continuation Total clain	t 1. If more n Page of
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. AAFES Nonpriority Creditor's Name Attn: Bankruptcy Po Box 650060 Dallas, TX 75265 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ At least one of the debtors and another	e alphabetical order of the creditor claim. For each claim listed, identify wir creditors in Part 3.If you have more to the Last 4 digits of account number. When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsections.	who holds ead hat type of clair han three nongular records a second record	m it is. Do not list claims priority unsecured claims ed 10/17 Last Actives	already included in Par fill out the Continuation Total clain	t 1. If more n Page of
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. AAFES Nonpriority Creditor's Name Attn: Bankruptcy Po Box 650060 Dallas, TX 75265 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	e alphabetical order of the creditor claim. For each claim listed, identify what reditors in Part 3.If you have more to the Last 4 digits of account number. When was the debt incurred? As of the date you file, the claim of the contingent of the continue of the continue of the continue of the continue of the continu	who holds ead to type of clair han three nonger 7723 Opene 8/31/18 im is: Check a	m it is. Do not list claims priority unsecured claims ed 10/17 Last Actives all that apply	already included in Par fill out the Continuation Total clain Ve	t 1. If more n Page of
□ No. You have nothing to report in this part. Submit ▼ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the othe Part 2. AAFES Nonpriority Creditor's Name Attn: Bankruptcy Po Box 650060 Dallas, TX 75265 Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	this form to the court with your other states alphabetical order of the creditor of claim. For each claim listed, identify what creditors in Part 3.If you have more to be compared to the creditors in Part 3.If you have more to be compared to the creditors in Part 3.If you have more to be creditors in Part 3.If you have more to be creditors in Part 3.If you have more to be creditors in Part 3.If you have more to be creditors in Part 3.If you have more to be creditors in Part 4.If you have more	who holds ead to type of clair han three nonger 7723 Opene 8/31/18 im is: Check a	m it is. Do not list claims priority unsecured claims ed 10/17 Last Actives all that apply	already included in Par fill out the Continuation Total clain Ve	t 1. If more n Page of
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the othe Part 2. AAFES Nonpriority Creditor's Name Attn: Bankruptcy Po Box 650060 Dallas, TX 75265 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other states alphabetical order of the creditor scalaim. For each claim listed, identify what creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 4.If you	who holds ear nat type of clair han three nong er 7723 Opene 8/31/18 im is: Check a	m it is. Do not list claims priority unsecured claims ed 10/17 Last Active all that apply	already included in Par fill out the Continuation Total clain Ve	t 1. If more n Page of

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 11

Ace Cash Express	Last 4 digits of account number	8892	\$910.7
Nonpriority Creditor's Name Collection Dept. 1231 Greenway Dr. Ste. 700	When was the debt incurred?	2019	
Irving, TX 75038 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify payday loan	n	
Caine & Weiner	Last 4 digits of account number	1113	\$393.0
Nonpriority Creditor's Name 5805 Sepulveda Blvd, 4th Floor Van Nuys, CA 91411	When was the debt incurred?	2016	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin		
Yes	Other. Specify inssurance	premium	
Cash Factory Nonpriority Creditor's Name	Last 4 digits of account number	unknown	\$592.4
6965 S. Rainbow Blvd, #130 Las Vegas, NV 89118	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	Student loans		
ls the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify payday loan	n	

Official Form 106 E/F Scheo

Schedule E/F: Creditors Who Have Unsecured Claims

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Chase Auto Finance	Last 4 digits of account number	5500	\$7,573.00
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 01/16 Last Active	, , , , , , , , ,
Po Box 901076 Fort Worth, TX 76101	When was the debt incurred?	7/11/17	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
\square Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify repo deficie	ency	
Check 'n Go Nonpriority Creditor's Name	Last 4 digits of account number	0172	Unknown
100 Commerical Drive Fairfield, OH 45104	When was the debt incurred?	2016	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify payday load	<u>n</u>	
Cincinnati Bell	Last 4 digits of account number	5225	\$1,191.54
Nonpriority Creditor's Name P.O. Box 748003 Cincinnati, OH 45274-8003	When was the debt incurred?	2018-2019	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify utility bill		

Schedule E/F: Creditors Who Have Unsecured Claims

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Credit Collection Services	Last 4 digits of account number	6871	\$216.00
Nonpriority Creditor's Name			Ψ=10.00
P.O. Box 607 Norwood, MA 02062	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	Other. Specify collection a	account	
Credit One Bank	Last 4 digits of account number	6774	\$861.00
Nonpriority Creditor's Name P.O. Box 98872	When was the debt incurred?	2017	
_as Vegas, NV 89193 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	,	an and apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify credit card		
Daniel Zegarski, Esq.	Look delimite of account mumbers		\$3,200.00
Nonpriority Creditor's Name	Last 4 digits of account number		ψ3,200.00
411 Madison Avenue	When was the debt incurred?	2019	
Covington, KY 41011 Number Street City State Zip Code	As of the date you file, the claim i	is: Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim i	в. Спеск ан так арргу	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt is the claim subject to offset?	Obligations arising out of a sepa	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ig plans, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

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Diversified Consultants, Inc.	Last 4 digits of account number	6956	\$511.0
Nonpriority Creditor's Name P.O. Box 551268	When was the debt incurred?	2018	
Jacksonville, FL 32255	= A		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify collection a	account	
D		0000	4000 5
Duke Energy Nonpriority Creditor's Name	Last 4 digits of account number		\$982.5
P.O. Box 1327 Charlotte, NC 28201	When was the debt incurred?	2018-2019	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify utility bill		
Enhanced Basevery Corn		0015	\$331.0
Enhanced Recovery Corp. Nonpriority Creditor's Name	Last 4 digits of account number		φ331. 0
P.O. Box 57547	When was the debt incurred?	2018	
Jacksonville, FL 32241			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	Пол		
Debtor 1 only Debtor 2 only	☐ Contingent		
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
☐ Deptor 1 and Deptor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ At least one of the deptors and another ☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	Other Specify collection a		

Schedule E/F: Creditors Who Have Unsecured Claims

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ERC	Last 4 digits of account number	7262	\$511.41	
Nonpriority Creditor's Name P.O. Box 23870	When was the debt incurred?	2017	<u> </u>	
Jacksonville, FL 32241-3870	_			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	Disputed	d alatina		
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:		
☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not		
Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	og plans, and other similar debts		
■ No □ Yes	·			
⊔ Yes	Other. Specify collection a	account		
Fedloan Servicing	Last 4 digits of account number	3733	\$3,300.00	
Nonpriority Creditor's Name P.O. Box 60610 Harrisburg, PA 17106	When was the debt incurred?	2018		
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
No	Debts to pension or profit-sharin	og plane, and other similar debts		
■ No □ Yes	Other. Specify student loa			
	— Ottler. Specify			
First Premier Bank	Last 4 digits of account number	5515	\$692.00	
Nonpriority Creditor's Name 3820 N. Louise Avenue Sioux Falls, SD 57107-0145	When was the debt incurred?	2016		
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
☐ Yes	■ Other Specify credit card			

Schedule E/F: Creditors Who Have Unsecured Claims

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GM Financial	Last 4 digits of account number	4728	\$11,078.0	
Nonpriority Creditor's Name P.O. Box 181145		2011		
Arlington, TX 76096	_			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
_				
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:		
At least one of the debtors and another	Student loans	a ciaiii.		
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not		
No	Debts to pension or profit-sharin	o plans, and other similar debts		
□ Yes	Other. Specify repo deficit			
Meade & Associates Nonpriority Creditor's Name	Last 4 digits of account number	9139	\$243.00	
737 Enterprise Drive Westerville, OH 43081	When was the debt incurred?	2015		
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
☐ Yes	Other. Specify collection a	account		
Millitary Star/The Exchange	Last 4 digits of account number	7723	\$631.92	
Nonpriority Creditor's Name	Last 4 digits of account number		ψ001.02	
P.O. Box 740890	When was the debt incurred?	2018		
Cincinnati, OH 45274-0890 Number Street City State Zip Code	- As of the data you file the claim i	in Charle all that apply		
Who incurred the debt? Check one.	As of the date you file, the claim i	s: Cneck all that apply		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
☐ Yes	Other. Specify credit card	lit card		

Schedule E/F: Creditors Who Have Unsecured Claims

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Money Key	Last 4 digits of account number un	nknown	Unknown
Nonpriority Creditor's Name 3422 Old Capital suite 1613	When was the debt incurred?		
Wilmington, DE 19808			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Ch	neck all that apply	
_	Пол		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured clai	im·	
At least one of the debtors and another	Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation report as priority claims	n agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing plan	ns, and other similar debts	
☐ Yes	Other. Specify payday loan	· 	
Radius Global Solutions Nonpriority Creditor's Name	Last 4 digits of account number22		\$2,016.00
7831 Glenroy Road Ste 250A Minneapolis, MN 55439	When was the debt incurred? 20	116	
Number Street City State Zip Code	As of the date you file, the claim is: Ch	neck all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured clai	im:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separation report as priority claims	n agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing plan	ns. and other similar debts	
□ Yes	■ Other. Specify medical bills/co		
Receivables Performance Mgmt Nonpriority Creditor's Name	Last 4 digits of account number	<u></u>	Unknown
20816 44th Ave W Lynnwood, WA 98036	When was the debt incurred? 20	118	
Number Street City State Zip Code	As of the date you file, the claim is: Ch	neck all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured clai		
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation report as priority claims		
■ No	Debts to pension or profit-sharing plan		
☐ Yes	■ Other. Specify collection acco	nunt	

Schedule E/F: Creditors Who Have Unsecured Claims

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Speedy Cash	Last 4 digits of account number 9498	Unknowr
Nonpriority Creditor's Name P.O. Box 780408	When was the debt incurred?	
Wichita, KS 67278 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify payday loan	
TriHealth SBO	Last 4 digits of account number 4908	\$30.00
Nonpriority Creditor's Name P.O. Box 630892 Cincinnati, OH 45263	When was the debt incurred? 2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical bill	
USAA Savings Bank	Last 4 digits of account number 0247	\$1,998.00
Nonpriority Creditor's Name 10750 McDermott Fwy San Antonio, TX 78288-1600	When was the debt incurred? 2015	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify credit card	

Schedule E/F: Creditors Who Have Unsecured Claims

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Schedule E/F: Creditors Who Have Unsecured Claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Add all other nonpriority unsecured claims. Write that amount

Total Nonpriority. Add lines 6f through 6i.

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6h.

0.00

38,360.63

38,360.63

6h.

6j.

Fill in this infor					
Debtor 1	Kraig Leroy Reed	1			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number (if known)					Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit Name, Numb	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	- · · · · ·				
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
	,				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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Best Case Bankruptcy

Fill in this infor	mation to identify your	rase:			
Debtor 1					
Debitor 1	Kraig Leroy Reed First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number (if known)					☐ Check if this is an
					amended filing
Official Ea	, mos 40CLL				
	orm 106H	1.4			
Schedule	H: Your Code	ebtors			12/15
□ No ■ Yes 2. Within the Arizona, Ca ■ No. Go to	ne last 8 years, have you lifornia, Idaho, Louisiana, o line 3.	lived in a community pr Nevada, New Mexico, Pu	erto Rico, Texas, Washing	? (Community propert	ty states and territories include
☐ Yes. Did	your spouse, former spou	ise, or legal equivalent live	e with you at the time?		
in line 2 ag	ain as a codebtor only it), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make su	ire you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	nn 1: Your codebtor Number, Street, City, State and Zl	P Code		Column 2: The cro	editor to whom you owe the debt
	name of co-debtor			■ Schedule D, I □ Schedule E/F □ Schedule G Merchants Pref	ine 2.2 , line

						1			
	in this information to identify your calls								
Dei	btor 1 Kraig Leroy	Reed							
_	btor 2 puse, if filing)								
Uni	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF OHIO		_				
Case number			_			Check if this is	:		
(If kr	nown)					An amende			
						A supplement 13 income		g postpetition ollowing date:	
0	fficial Form 106I					MM / DD/ Y	/YYY		
S	chedule I: Your Inc	ome							12/15
	rt 1: Describe Employment Fill in your employment	On the top of any additi	onal pages, write yo	our name	e and	l case number (if	known). A	Answer every	question
	information.	Debtor 1			Debtor 2	Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed			☐ Empl	•		
		. ,	☐ Not employed			☐ Not e	mployed		
	employers.	Occupation	disabled Vetera	ın					
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Pai	rt 2: Give Details About Mor	nthly Income							
spoo	imate monthly income as of the duse unless you are separated. but or your non-filing spouse have more appared to the space, attach a separate sheet to	ore than one employer, co	,		•		·	•	J
						For Debtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	N/A	

Schedule I: Your Income

5,020.00

page 2

Combined monthly income

12.

Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it

13. Do you expect an increase or decrease within the year after you file this form?

applies

Official Form 106I

Yes. Explain:

Fill	in this information to identify yo	our case:					
	otor 1 Kraig Leroy I				Check	if this is:	
	Maig Leiby I	Neeu				an amended filing	
	tor 2						ving postpetition chapter
(Spo	ouse, if filing)				1	3 expenses as of t	the following date:
Unit	ed States Bankruptcy Court for the:	NORTH	ERN DISTRICT OF OHIO		N	MM / DD / YYYY	
!	e number nown)						
Of	fficial Form 106J						
Sc	chedule J: Your I	Expen	ses				12/15
Be info	as complete and accurate as ormation. If more space is ne nber (if known). Answer ever	possible. eded, attac y question	If two married people ar				
Par 1.	t 1: Describe Your House Is this a joint case?	hold					
	■ No. Go to line 2. □ Yes. Does Debtor 2 live i	n a conara	to household?				
	□ No	ii a separa	te nousenoiu:				
	= :::	t file Officia	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debto	or 2.	
2.	Do you have dependents?	□No					
	Do not list Debtor 1 and Debtor 2.	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the						■ No
	dependents names.			Daughter		5	☐ Yes
							□ No
				Daughter		15	Yes
							□ No
							☐ Yes
							□ No □ Yes
3.	Do your expenses include expenses of people other the	han 👝 .	No Yes				□ res
	yourself and your depender	nts?	163				
Est exp	t 2: Estimate Your Ongoin imate your expenses as of your expenses as of your expenses as of a date after the bolicable date.	our bankru	ptcy filing date unless y				
	lude expenses paid for with r value of such assistance and					v	
(Off	ficial Form 106l.)					Your expe	enses
4.	The rental or home ownersh payments and any rent for the			nclude first mortgage	4. \$		1,250.00
	If not included in line 4:						
	4a. Real estate taxes				4a. \$		0.00
	4b. Property, homeowner's	s, or renter's	s insurance		4b. \$		0.00
	4c. Home maintenance, re				4c. \$		0.00
5.	 4d. Homeowner's associate Additional mortgage payme 			me equity loops	4d. \$ 5. \$		0.00 0.00
J.	Additional mortgage paying	onto for you	ui residence, such as 110	no equity idans	υ. φ		0.00

Debtor 1	Kraig Leroy Reed	Case num	ber (if known)	
. Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	290.00
6b.	Water, sewer, garbage collection	6b.	\$	150.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	385.00
6d.	Other. Specify:	6d.	\$	0.00
. Foo	d and housekeeping supplies		\$	800.00
	dcare and children's education costs	8.	\$	260.00
	hing, laundry, and dry cleaning	9.	\$	250.00
	conal care products and services	10.	\$	80.00
	ical and dental expenses	11.	\$	150.00
	sportation. Include gas, maintenance, bus or train fare.			
	ot include car payments.	12.	\$	250.00
. Ente	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	70.00
	ritable contributions and religious donations	14.	\$	80.00
. Insu	rance.		· -	
Do r	ot include insurance deducted from your pay or included in lines 4 or 20.			
15a.	Life insurance	15a.	\$	25.00
15b.	Health insurance	15b.	*	0.00
15c.	Vehicle insurance	15c.	\$	201.00
15d.	Other insurance. Specify: eye care and dental insurance	15d.	\$	182.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spec	•	16.	\$	0.00
	allment or lease payments:		_	
	Car payments for Vehicle 1	17a.	· -	503.00
	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as		¢	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	· -	
_	er payments you make to support others who do not live with you.	19.	\$	0.00
Spec	ony. Fr real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i>		our Incomo	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20b.		0.00
	Maintenance, repair, and upkeep expenses	20d.	·	
	Homeowner's association or condominium dues		·	0.00
		20e.	·	0.00
	er: Specify: tobacco	21.		100.00
	care		+\$	75.00
	n care/snow removal		+\$	100.00
hair	care		+\$	100.00
. Calc	ulate your monthly expenses			
	Add lines 4 through 21.		\$	5,301.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	Add line 22a and 22b. The result is your monthly expenses.		\$	5,301.00
220.	The mile 220 and 220. The result is your monthly expenses.			3,301.00
. Calc	ulate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,020.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	5,301.00
			-	· · · · · · · · · · · · · · · · · · ·
23c.	Subtract your monthly expenses from your monthly income.		•	004.00
	The result is your monthly net income.	23c.	\$	-281.00
. Doy	rou expect an increase or decrease in your expenses within the year after your			or decrease bossues of
. Doy For e	xample, do you expect to finish paying for your car loan within the year or do you expect your			or decrease because of
4. Doy For e	xample, do you expect to finish paying for your car loan within the year or do you expect your fication to the terms of your mortgage?			or decrease because of

Fill in this inform	nation to identify your	case:		
Debtor 1	Kraig Leroy Reed			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Check if this is an amended filing
Official Forn	n 106Dec			
		n Individual	Debtor's Scho	edules 12/15
obtaining money		connection with a bank		aking a false statement, concealing property, or nes up to \$250,000, or imprisonment for up to 20
Sign	n Below			
Did you pay	y or agree to pay some	one who is NOT an attor	ney to help you fill out bank	kruptcy forms?
■ No				
☐ Yes. N	lame of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)		
	Ity of perjury, I declare etrue and correct.	that I have read the sum	mary and schedules filed w	rith this declaration and
X /s/ Krai	ig Leroy Reed		X	
Kraig L	e of Debtor 1		Signature of Deb	btor 2
Date _	August 14, 2019		Date	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in this infor	rmation to identify you	r case:			
Debtor 1	Kraig Leroy Ree				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
		NORTHERN DISTRICT			
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number (if known)					Check if this is an amended filing
Be as complete	t of Financial	ble. If two married people		Bankruptcy re equally responsible for son	
	vn). Answer every que Details About Your Ma	stion. arital Status and Where Yo	ou Lived Before		
1. What is you	ur current marital statu	ıs?			
☐ Marrie ■ Not ma					
	ist all of the places you	ived in the last 3 years. Do Dates Debtor lived there	not include where you live no Debtor 2 Prior A		Dates Debtor 2
	lor Court ti, OH 45215	From-To: 4/1/2016 to 5/31/2019	☐ Same as Debto	r 1	☐ Same as Debtor 1 From-To:
states and territo	ories include Arizona, Ca		levada, New Mexico, Puerto I	inity property state or territo Rico, Texas, Washington and	
Part 2 Expla	ain the Sources of You	r Income			
Fill in the to	tal amount of income yo	u received from all jobs and	ing a business during this yad all businesses, including paive together, list it only once u		lendar years?
_	ill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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Include in and othe	ncome regardl er public benefi	ess of wheth t payments; p	e during this year or the two er that income is taxable. Exa pensions; rental income; inter e and you have income that y	amples of other income are a est; dividends; money collect	alimony; child support; Soci ted from lawsuits; royalties	
List each	n source and th	ne gross inco	me from each source separa	tely. Do not include income t	hat you listed in line 4.	
□ No		-			•	
	s. Fill in the det	tails.				
			Dobtor 1		Dobtor 2	
			Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	ry 1 of curren ı filed for ban		SS Disablity / monthly	\$1,720.00		
			VA Disablity / monthly	\$3,300.00		
For last calendar year: (January 1 to December 31, 2018)			SS Disablity / monthly	\$1,720.00		
			VA Disablity / monthly	\$3,300.00		
	ndar year bef o December 3		SS Disablity / monthly	\$1,720.00		
			VA Disablity / monthly	\$3,300.00		
Part 3: Lis	st Certain Pay	ments You	Made Before You Filed for	Bankruptcy		
6. Are eith	Neither De	btor 1 nor D	s debts primarily consumer ebtor 2 has primarily consu personal, family, or househol	imer debts. Consumer debt	s are defined in 11 U.S.C.	§ 101(8) as "incurred by an
	During the s	Go to line 7.	re you filed for bankruptcy, di ach creditor to whom you pai			and the total amount you
		paid that cre	editor. Do not include paymer payments to an attorney for the on 4/01/22 and every 3 years	nts for domestic support obliquis bankruptcy case.	gations, such as child supp	ort and alimony. Also, do
■ Yes			r both have primarily consure you filed for bankruptcy, di		l of \$600 or more?	
	□ No. ■ Yes	include payı	ach creditor to whom you pai nents for domestic support ol this bankruptcy case.			
Credito	r's Name and	Address	Dates of payme	nt Total amount	Amount you Was t	his payment for

Case number (if known)

Official Form 107

Debtor 1 Kraig Leroy Reed

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known)

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Official Form 107

Debtor 1

Kraig Leroy Reed

Best Case Bankruptcy

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

Daniel Zegarski, Esq. 411 Madison Avenue Covington, KY 41011 dzegarski@steidenlaw.com	legal fees for chapter 13	3/1/19	\$500.00						
Person who made the Payment, if Not Y									
Person Who Was Paid Address Email or website address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment						
Yes. Fill in the details.									
consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition p	preparing a bankruptcy petition?		rty to anyone you						
t 7: List Certain Payments or Transfers	5								
☐ Yes. Fill in the details. Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost						
Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No									
		dida a harawa a fidi at	(1 Car all an Illandan						
Charity's Name Address (Number, Street, City, State and ZIP Code	a)	Contributed							
Gifts or contributions to charities that		Dates you	Value						
■ No		al value of more than	\$600 to any charity?						
Person to Whom You Gave the Gift and Address:									
· ·	Describe the gifts	Dates you gave the gifts	Value						
■ No	uptcy, did you give any gifts with a total value of more t	han \$600 per person	?						
t 5: List Certain Gifts and Contribution	s								
	Within 2 years before you filed for bankre No Yes. Fill in the details for each gift. Gifts with a total value of more than \$60 per person Person to Whom You Gave the Gift and Address: Within 2 years before you filed for bankre No Yes. Fill in the details for each gift or of Gifts or contributions to charities that formore than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code 16: List Certain Losses Within 1 year before you filed for bankre or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred 17: List Certain Payments or Transfers Within 1 year before you filed for bankre consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition propers. No Yes. Fill in the details. Person Who Was Paid Address	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more to the second presson to Whom You Gave the Gift and Address: Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total No	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person No						

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Kraig Leroy Reed		Case number (if known)						
17.	Within 1 year before you filed for bankrupto promised to help you deal with your creditor Do not include any payment or transfer that you	ors or to make payments			r transfer any prope	rty to anyone who		
	No No							
	Yes. Fill in the details.							
	Person Who Was Paid Address	Description and value transferred	value of any prope	rty	Date payment or transfer was made	Amount of payment		
 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than protransferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property) include gifts and transfers that you have already listed on this statement. No 								
	Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and v property transfer		Describe a payments paid in ex	any property or received or debts change	Date transfer was made		
	Person's relationship to you							
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details.		ny property to a sel	lf-settled tru	ist or similar device (of which you are a		
	Name of trust	Description and	Description and value of the property transferred			Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, In:	struments. Safe Deposi	t Boxes, and Stora	ae Units				
	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, asso	y, were any financial acor	ccounts or instrum	ents held in				
	Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument		te account was sed, sold, oved, or nsferred	Last balance before closing or transfer		
	USAA Bank	XXXX-	■ Checking □ Savings □ Money Market □ Brokerage □ Other		2019	\$0.00		
21.	cash, or other valuables?	year before you filed fo	r bankruptcy, any s	safe deposit	box or other deposi	tory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the	contents	Do you still have it?		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bank					ar before you filed for bankruptcy?	?
		No Yes. Fill in the details.				
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		scribe the contents	Do you still have it?
	? Cir	ncinnati, OH		fui	rniture	□ No ■ Yes
Par	t 9:	Identify Property You Hold or Control for	Someone Else			
23.	•	you hold or control any property that some comeone.	one else owns? Include any proper	rty y	ou borrowed from, are storing for	, or hold in trust
		No Yes. Fill in the details.				
		ner's Name dress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value
Par	t 10:	Give Details About Environmental Inform	ation			
For	the p	urpose of Part 10, the following definitions	apply:			
	toxi	ironmental law means any federal, state, or c substances, wastes, or material into the a lations controlling the cleanup of these su	ir, land, soil, surface water, ground	_	•	
		means any location, facility, or property as wn, operate, or utilize it, including disposal	-	law,	whether you now own, operate, o	or utilize it or used
	Haz	ardous material means anything an environ ardous material, pollutant, contaminant, or	mental law defines as a hazardous	s wa	ste, hazardous substance, toxic s	substance,
Rep	ort a	Il notices, releases, and proceedings that ye	ou know about, regardless of whe	n the	ey occurred.	
24.	Has	any governmental unit notified you that yo	u may be liable or potentially liable	unc	der or in violation of an environme	ental law?
		No Yes. Fill in the details.				
		ne of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice
25.	Hav	e you notified any governmental unit of any	release of hazardous material?			
		No Yes. Fill in the details.				
		ne of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice
26.	Hav	e you been a party in any judicial or admini	strative proceeding under any envi	ironı	mental law? Include settlements a	and orders.
		No Yes. Fill in the details.				
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Best Case Bankruptcy

De	btor 1	Kraig Leroy Reed	Cas	se number (if known)						
Pai	rt 11:	Give Details About Your Business or	Connections to Any Business							
27.	With	in 4 years before you filed for bankrup	tcy, did you own a business or have any of	the following connections to any business?						
		☐ A sole proprietor or self-employed i	in a trade, profession, or other activity, eith	er full-time or part-time						
		☐ A member of a limited liability comp	oany (LLC) or limited liability partnership (L	LP)						
		☐ A partner in a partnership								
		☐ An officer, director, or managing executive of a corporation								
		☐ An owner of at least 5% of the votin	g or equity securities of a corporation							
		No. None of the above applies. Go to	Part 12.							
		Yes. Check all that apply above and fil	I in the details below for each business.							
	Add	iness Name Iress	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.						
	(Num	ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed						
	□ Nan		Date Issued							
		Iress ber, Street, City, State and ZIP Code)								
Pai	rt 12:	Sign Below								
are with 18 U	true a n a bai J.S.C.	nd correct. I understand that making a		leclare under penalty of perjury that the answers otaining money or property by fraud in connection rs, or both.						
Kr	aig L	eroy Reed	Signature of Debtor 2							
Sig	ınatur	e of Debtor 1								
Da	te A	ugust 14, 2019	Date							
Did ■ N	No	ttach additional pages to Your Stateme	ent of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?						
Did ■ N		ay or agree to pay someone who is no	t an attorney to help you fill out bankruptcy	forms?						
		ame of Person Attach the Bankru	uptcy Petition Preparer's Notice, Declaration, a	nd Signature (Official Form 119).						

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Krain Larey Bood				
Jebioi i	Kraig Leroy Reed First Name	Middle Name	Last Name		
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name		
-	ankruptcy Court for the:	NORTHERN DIS	TRICT OF OHIO		
Case number					
if known)				_	neck if this is an nended filing
Official Fo	vrm 108				
		n for Indiv	viduals Filing Under Cl	napter 7	12/15
vou are an ind	lividual filing under char	oter 7. vou must fil	Lout this form if:	•	
_*	e claims secured by you				
ou must file th	ever is earlier, unless the	ithin 30 days after	ot expired. you file your bankruptcy petition or by th e time for cause. You must also send cop		
	eople are filing together nd date the form.	in a joint case, bo	th are equally responsible for supplying o	correct information. Bo	oth debtors must
	and accurate as possible our name and case num		s needed, attach a separate sheet to this f	orm. On the top of any	additional pages,
Part 1: List Y	our Creditors Who Have	Secured Claims			
. For any credi	tors that you listed in Pa	rt 1 of Schedule D	: Creditors Who Have Claims Secured by	Property (Official Forr	m 106D), fill in the
information b	elow. reditor and the property th	nat is collateral	What do you intend to do with the prop secures a debt?		ı claim the property npt on Schedule C?
Creditor's (Chrysler Capital		☐ Surrender the property.	□No	
name:	om yeler Cupital		Retain the property and redeem it.	— 110	
Description of property securing debt	2017 Jeep Renegad miles	de 38,000	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes	
Creditor's name:	Merchants Preferred L	.ease-	☐ Surrender the property. ☐ Retain the property and redeem it.	□No	
Description of	Sectional couch		Retain the property and enter into a Reaffirmation Agreement.	■ Yes	
property securing debt	:		Retain the property and [explain]:		
Part 2: List Y	our Unexpired Personal	Property Leases			
or any unexpir	ed personal property lea	se that you listed	in Schedule G: Executory Contracts and expired leases are leases that are still in		
			the trustee does not assume it. 11 U.S.C.		a nas not yet ended

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Best Case Bankruptcy

Debtor	1 Kraig Leroy Reed	Case number (if known)
	's name: otion of leased ty:	□ No □ Yes
	's name: otion of leased ty:	□ No
	's name: otion of leased ty:	□ No
	's name: otion of leased ty:	□ No
	's name: otion of leased ty:	□ No
	's name: otion of leased ty:	□ No
	's name: otion of leased ty:	□ No
Under	Sign Below Denalty of perjury, I declare that I have indicated my intention about any prope	rty of my estate that secures a debt and any personal
X /s	ty that is subject to an unexpired lease. X Raig Leroy Reed Raig Leroy Reed Signature of Debtor 1	of Debtor 2
D	ate August 14, 2019 Date	

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Fill i	n this information to identify your case:				only as d	lirected in this form and	in Form
Deb	otor 1 Kraig Leroy Reed		122	2A-1Supp:			
	use, if filing)			■ 1. There is	s no pres	umption of abuse	
Unit	ed States Bankruptcy Court for the: Northern District o	f Ohio				to determine if a presur nade under <i>Chapter 7 i</i>	•
Cas	e number					icial Form 122A-2).	
(if kno	own)					does not apply now be y service but it could ap	
				☐ Check if	this is a	in amended filing	
	<u>ficial Form 122A - 1</u>						
Ch	apter 7 Statement of Your Cur	rent Mon	thly Inc	ome			12/15
attac case	s complete and accurate as possible. If two married people as ha separate sheet to this form. Include the line number to w number (if known). If you believe that you are exempted fror fying military service, complete and file Statement of Exempter Calculate Your Current Monthly Income	hich the additiona n a presumption o	al information a of abuse becau	applies. On the	e top of a have prir	ny additional pages, writ marily consumer debts o	te your name and or because of
1.	What is your marital and filing status? Check one on	ly.					
	■ Not married. Fill out Column A, lines 2-11.						
	☐ Married and your spouse is filing with you. Fill ou		·	2-11.			
	☐ Married and your spouse is NOT filing with you.						
	Living in the same household and are not lega						
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legaliving apart for reasons that do not include evading	egally separated	under nonban	kruptcy law t	hat appli	es or that you and your	
10 th	ill in the average monthly income that you received from all st 01(10A). For example, if you are filing on September 15, the 6-m le 6 months, add the income for all 6 months and divide the total property, put the income from that p	onth period would by 6. Fill in the res	oe March 1 throu ult. Do not includ	ugh August 31. de any income	If the amount m	ount of your monthly incompose than once. For examp	ne varied during ble, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	and commission	ns (before all	\$	0.00	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payments from a	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp	Include regular , your dependen	contributions ts, parents,				
	filled in. Do not include payments you listed on line 3.	•	=	\$	0.00	\$	
5.	Net income from operating a business, profession,	or farm Debt	or 1				
	Cross resoints (hefers all deductions)	\$ 0.00	OI I				
	Gross receipts (before all deductions) Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from a business, profession, or farr	n \$ 0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	,					
		Debt	or 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00	O	•	0.00	c	
	Net monthly income from rental or other real property	\$	Copy here ->	\$	0.00	\$	
	Interest distance and secolities			*	v.uu	Ψ	

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

0.00

page 1

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7. Interest, dividends, and royalties

							Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unem	ploy	ment compensation			9	\$	0.00	\$		
	Do not	ente	er the amount if you contend that the amount Security Act. Instead, list it here:	t received was a benefi	t under	•					
		you		0.0	0						
	For	your	spouse \$								
	benefit	t und	r retirement income. Do not include any am ler the Social Security Act.			9	\$	0.00	\$		
10.	Do not receive	inclued as tic te	om all other sources not listed above. Speude any benefits received under the Social Sea victim of a war crime, a crime against hurerrorism. If necessary, list other sources on a	Security Act or payment manity, or international	s or						
		. <u>V</u>	A disablity					300.00	\$		
						(\$	0.00	\$		
		To	otal amounts from separate pages, if any.		+	(\$	0.00	\$		
11.			your total current monthly income. Add ling. Then add the total for Column A to the to		\$	3,	300.00	+ \$		= \$	3,300.00
										Total o	current monthly
Part	2:	Dete	ermine Whether the Means Test Applies t	o You							•
12	Calcul	late v	your current monthly income for the year.	Follow these steps:							
			your total current monthly income from line 1	·			Conv	/ line 11 l	nere=>	\$	3,300.00
	124. 0	ОРУ	your total ourself monthly moonle from the	· ·				,			3,300.00
	M	lultip	ly by 12 (the number of months in a year)							X	12
	12b. T	he re	esult is your annual income for this part of the	e form					12b	\$	39,600.00
13.	Calcul	late 1	the median family income that applies to	you. Follow these step	s:						
	Fill in t	he s	tate in which you live.	ОН							
	Fill in t	he n	umber of people in your household.	3							
	Fill in t	he m	nedian family income for your state and size	of household.					13.	\$	74,969.00
			st of applicable median income amounts, go n. This list may also be available at the bank		ecified	in	the separa	te instruc	tions		
14.	How d	lo th	e lines compare?								
	14a.		Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, che	eck box	(1	, There is r	no presum	ption of abus	э.	
	14b.		Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	The pr	es	umption of	abuse is	determined by	Form 1	22A-2.
Part	3:	Sign	n Below								
	В	y sig	ning here, I declare under penalty of perjury	that the information on	this sta	ate	ement and i	in any atta	achments is tr	ue and c	orrect.
	Х	/s/	Kraig Leroy Reed								
			aig Leroy Reed nature of Debtor 1								
	Date	Au MM	gust 14, 2019								
	If		checked line 14a, do NOT fill out or file Forn	n 122A-2.							
		•	checked line 14b, fill out Form 122A-2 and fi								
		•	· · · · · · · · · · · · · · · · · · ·								

Official Form 122A-1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	:	Liquidation
\$2	45	filing fee
\$	75	administrative fee
+ \$	15	trustee surcharge
\$3	35	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

In re	Kraig Leroy Reed		Case No.				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPENS	ATION OF ATTO	RNEY FOR DI	EBTOR(S)			
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	850.00			
	Prior to the filing of this statement I have received			850.00			
	Balance Due		\$	0.00			
2. \$	335.00 of the filing fee has been paid.						
3. T	he source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
4. T	he source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
5.	I have not agreed to share the above-disclosed compensation	ation with any other person	unless they are mem	bers and associates of my law firm.			
[☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.						
6. I	n return for the above-disclosed fee, I have agreed to rende	r legal service for all aspec	ets of the bankruptcy	case, including:			
 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. 							
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.							
	(CERTIFICATION					
	certify that the foregoing is a complete statement of any ag nkruptcy proceeding.	reement or arrangement fo	r payment to me for r	representation of the debtor(s) in			
Αι	gust 14, 2019	/s/ Lee R. Kravitz	Z				
Date		Lee R. Kravitz 0025634					
			Signature of Attorney Law Offices of Lee R. Kravitz				
4508 State Road							
			Cleveland, OH 44109				
		216-749-0808 Fax: 216-749-5389 leekravitz@sbcglobal.net					
		Name of law firm	,				

United States Bankruptcy Court Northern District of Ohio

In re	Kraig Leroy Reed		Case No.	
		Debtor(s)	Chapter	7
The abo	ove-named Debtor hereby verifies	s that the attached list of creditors is true and co	rrect to the best of	of his/her knowledge.
Date:	August 14, 2019	/s/ Kraig Leroy Reed		
		Kraig Leroy Reed		
		Signature of Debtor		

AAFES Attn: Bankruptcy Po Box 650060 Dallas, TX 75265

AAFES 3911 Walton Walker Dallas, TX 75266

Ace Cash Express Collection Dept. 1231 Greenway Dr. Ste. 700 Irving, TX 75038

Caine & Weiner 5805 Sepulveda Blvd, 4th Floor Van Nuys, CA 91411

Cash Factory 6965 S. Rainbow Blvd, #130 Las Vegas, NV 89118

Chase Auto Finance Attn: Bankruptcy Po Box 901076 Fort Worth, TX 76101

Chase Auto Finance Po Box 901003 Ft Worth, TX 76101

Check 'n Go 100 Commerical Drive Fairfield, OH 45104

Chrysler Capital Attn: Bankruptcy Dept. P.O. Box 961245 Fort Worth, TX 76161-1278

Cincinnati Bell P.O. Box 748003 Cincinnati, OH 45274-8003

Credit Collection Services P.O. Box 607 Norwood, MA 02062

Credit One Bank P.O. Box 98872 Las Vegas, NV 89193

Daniel Zegarski, Esq. 411 Madison Avenue Covington, KY 41011

Diversified Consultants, Inc. P.O. Box 551268
Jacksonville, FL 32255

Duke Energy P.O. Box 1327 Charlotte, NC 28201

Enhanced Recovery Corp. P.O. Box 57547 Jacksonville, FL 32241

ERC P.O. Box 23870 Jacksonville, FL 32241-3870

Fedloan Servicing P.O. Box 60610 Harrisburg, PA 17106

First Premier Bank 3820 N. Louise Avenue Sioux Falls, SD 57107-0145

GM Financial P.O. Box 181145 Arlington, TX 76096

Meade & Associates 737 Enterprise Drive Westerville, OH 43081 Merchants Preferred Lease-Purchae Serv a division of C/C Financial Corp. 5500 Interestate North, ste 350 Atlanta, GA 30328

Millitary Star/The Exchange P.O. Box 740890 Cincinnati, OH 45274-0890

Money Key 3422 OId Capital suite 1613 Wilmington, DE 19808

need name of co-debtor

Progressive Leasing 256 Data Drive Draper, UT 84020

Radius Global Solutions 7831 Glenroy Road Ste 250A Minneapolis, MN 55439

Receivables Performance Mgmt 20816 44th Ave W Lynnwood, WA 98036

Speedy Cash P.O. Box 780408 Wichita, KS 67278

State of Ohio Department of Taxation 30 E. Broad St. - 21st Fl. Columbus, OH 43215

TriHealth SBO P.O. Box 630892 Cincinnati, OH 45263

USAA Savings Bank 10750 McDermott Fwy San Antonio, TX 78288-1600 Webbank/Fingerhut 6250 Ridgewood Road Saint Cloud, MN 56303